



PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of

Kousuke SUZUKI

Group Art Unit: Unknown

Application No.: 10/713,269

Examiner: Unknown

Filed: November 17, 2003

Docket No.: 108946.01

For: IMAGE FORMATION CHARACTERISTICS ADJUSTMENT METHOD FOR
PROJECTION OPTICAL SYSTEM

PRELIMINARY AMENDMENT UNDER 37 C.F.R. §1.115

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Prior to examination, please consider the following:

Amendments to the Claims as reflected in the listing of claims;

Remarks.

01/15/2004 HALI11 00000042 10713269

01 FC:1201

344.00 DP

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PATENT APPLICATION

Attorney Docket No.: 108946.01

AMENDMENT TRANSMITTAL

In re the Application of

Kousuke SUZUKI

Group Art Unit: Unknown

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For: IMAGE FORMATION CHARACTERISTICS ADJUSTMENT METHOD FOR PROJECTION OPTICAL SYSTEM

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- ☐ Entitlement to small entity status is hereby asserted.
☐ Small entity status of this application has been established.

The filing fee has been calculated as shown below:

(Column 1)		(Column 2)	(Column 3)	SMALL ENTITY		OR	OTHER THAN A SMALL ENTITY	
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADD'L FEE		RATE	ADD'L FEE
TOTAL CLAIMS	*33 MINUS	**41	=0	x 9	\$	OR	x 18	\$ ---
INDEP CLAIMS	*11 MINUS	***7	=4	x 43	\$		x 86	\$ 344
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+ 145	\$	OR	+ 290	\$
					\$			\$ 344

- * If the entry in Column 1 is less than the entry in Column 2, write "0" in Column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" in this space (Total or Independent) is the highest number found from the equivalent box in Column 1 of a prior Amendment or the number of claims originally filed.

- ☒ Check No. 150107 in the amount of \$344 is attached. The Commissioner is hereby authorized to charge any other fees that may be required to complete this filing, or to credit any overpayment, to Deposit Account No. 15-0461. Two duplicate copies of this sheet are attached.

Respectfully submitted,

Mario A. Costantino
Registration No. 33,565

Robert A. Miller
Registration No. 32,771

MAC:RAM/sxb

Date: January 14, 2004